

Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.lowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

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Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

For office use only
Audited
Checked
Computer

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

Provide a description of the gift or bequest and purpose thereof: Donation to the General Fund - Latino Affairs - 0186-LADN-99	IA Department of Human I	Rights	
City, State, Zip Code Sistati-toso ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE: Sonia Reyes-Snyder Name Mailing Address (if different from above) sooils reyes-snyder@iowa.gov (Email Address ONOR OF GIFT OR BEQUEST: LULAC General Account Name PO Box 4616 Davenport, IA 52808 Mailing Address City, State, Zip Code 12/29/17 \$ 150.00 Date of Gift or Bequest Area Code & Telephone Number Email Address (optional) Provide a description of the gift or bequest and purpose thereof: Donation to the General Fund - Latino Affairs - 0186-LADN-99	lame of Department or Office		
Area Code & Telephone No. DNTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE: Sonia Reyes-Snyder Name Mailing Address (if different from above) socia.toyes-snyder@iowa.gov (Email Address ONOR OF GIFT OR BEQUEST: LULAC General Account Name PO Box 4616 Davenport, IA 52808 Mailing Address City, State, Zip Code 12/29/17 \$ 150.00 Date of Gift or Bequest Amount/Value* "value is defined as "fair market value" of Item as determine receiving department or office. If no value mark "0,00". Email Address (optional) Provide a description of the gift or bequest and purpose thereof: Donation to the General Fund - Latino Affairs - 0186-LADN-99	falling Address		
Sonia Reyes-Snyder Name Name Mailing Address (if different from above) soals.reyes-snyder@sows.gov (Email Address Area Code & Telephone Number (if different from above) ONOR OF GIFT OR BEQUEST: LULAC General Account Name PO Box 4616 Mailing Address City, State, Zip Code Area Code & Telephone Number 12/29/17 \$150.00 Date of Gift or Bequest Amount/Value* *value is defined as "fair market value" of item as determine receiving department or office. If no value mark "0,00". Email Address (optional) Provide a description of the gift or baquest and purpose thereof: Donation to the General Fund - Latino Affairs - 0186-LADN-99			
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Official to the rule form.	Criteria to use this form:		
Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.	Baselet of any aift or because the	t is received by any department of it	ne state or received by the Governor on behalf of the state.
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Statement of Affirmation:

Sonia Reyes-Snyder : affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Signature

January 9, 2018

Date